

# Summary of Opinions

- Neurontin is a safe and effective treatment for neuropathic pain and is widely regarded in neurology as one of the most useful medication options for treating chronic neuropathic pain
- The labeling, or professional package insert, for Neurontin approved by FDA at the time of Mr. Smith's death adequately communicated the potential benefits and risks of Neurontin to doctors
- The dosage of Neurontin that Mr. Smith was prescribed at the time of his death was relatively low and was probably insufficient to provide significant pain relief
- Mr. Smith's suicide is most likely attributable to his chronic pain, his depression, and his feelings of hopelessness after being informed shortly before his death that there were no additional treatment options for his severe, chronic pain

Case 3:05-cv-00444 Document 173-2 Filed 04/27/10 Page 1 of 12 PageID #: 3966

# Mr. Smith's Pain Complaints

1988	1989	1990	1991	1992	1993
<b>Dr. Tom Nesbitt</b> <ul style="list-style-type: none"> <li>Rectal <b>pain</b> with radiation, began after knee surgery <small>Spalding &amp; Nesbitt Urology Clinic, 000006-625NUC-00027</small></li> </ul>	<b>Dr. James Cato</b> <ul style="list-style-type: none"> <li>Hand tightness; decreased grip <small>Heritage Medical Associates, 000006-1PRD-00009</small></li> <li>Pelvic <b>pain</b> <small>Heritage Medical Associates, 000006-42HMA-00216</small></li> </ul> <b>Dr. Stewart F. Stowers</b> <ul style="list-style-type: none"> <li>Right heel <b>pain</b>; right knee <b>pain</b> <small>Nashville Orthopedic Associates, 000006-69AQC-00077</small></li> <li>Bilateral knee <b>pain</b> <small>Nashville Orthopedic Associates, 000006-69AQC-00076</small></li> <li>Right hip <b>pain</b> <small>Nashville Orthopedic Associates, 000006-69AQC-00076</small></li> <li>Suprapubic <b>pain</b> [groin area] <small>Nashville Orthopedic Associates, 000006-69AQC-00075</small></li> </ul>	<b>Dr. Stewart F. Stowers</b> <ul style="list-style-type: none"> <li>Left hip <b>pain</b> extending to groin <small>Nashville Orthopedic Associates, 000006-69AQC-00074</small></li> </ul> <b>Dr. James Cato</b> <ul style="list-style-type: none"> <li>Back <b>pain</b>; upper abdominal burning; tiredness <small>Heritage Medical Associates, 000006-42HMA-00217</small></li> <li>Left jaw and ear pressure/soreness; left facial numbness <small>Heritage Medical Associates, 000006-1PRD-00013</small></li> </ul> <b>Dr. Tom Nesbitt</b> <ul style="list-style-type: none"> <li>Testicular <b>pain</b> <small>Spalding &amp; Nesbitt Urology Clinic, 000006-625NUC-00025</small></li> </ul> <b>Dr. David M. Dyer</b> <ul style="list-style-type: none"> <li>Chronic right groin/testicular <b>pain</b> <small>000006-625NUC-00055</small></li> </ul>	<b>Dr. David M. Dyer</b> <ul style="list-style-type: none"> <li>Left groin <b>pain</b> <small>000006-625NUC-00054</small></li> </ul> <b>Dr. James Cato</b> <ul style="list-style-type: none"> <li>Left jaw, throat, and ear pressure <small>Heritage Medical Associates, 000006-1PRD-00015-16</small></li> <li>Left shoulder complaints; left hip soreness <small>Heritage Medical Associates, 000006-1PRD-00015-16</small></li> </ul>	<b>Dr. Michael Santi</b> <ul style="list-style-type: none"> <li>Chronic abdominal <b>pain</b> <small>Colon &amp; Rectal Surgery Associates, 000006-48CRSA-00009</small></li> </ul>	<b>Dr. Stewart F. Stowers</b> <ul style="list-style-type: none"> <li>Severe left knee problems; <b>pain</b> in left ankle <small>Nashville Orthopedic Associates, 000006-69AQC-00071</small></li> </ul> <b>Dr. James Cato</b> <ul style="list-style-type: none"> <li>Swelling in hands and ankles; left knee problems <small>Heritage Medical Associates, 000006-42HMA-00220</small></li> <li>Tenderness in left ribs <small>Heritage Medical Associates, 000006-1PRD-00022</small></li> </ul>
1994	1995	1996	1997	1998	1999
<b>Dr. Stewart F. Stowers</b> <ul style="list-style-type: none"> <li>Left knee tightness; <b>pain</b> in left ankle <small>Nashville Orthopedic Associates, 000006-69AQC-00064</small></li> </ul>	<b>Dr. James Cato</b> <ul style="list-style-type: none"> <li>Numbness to left side of face/eye; left tooth problems <small>Heritage Medical Associates, 000006-1PRD-00023</small></li> <li>Left chest soreness <small>Heritage Medical Associates, 000006-42HMA-00023</small></li> </ul> <b>Dr. David M. Dyer</b> <ul style="list-style-type: none"> <li>Left groin <b>pain</b> <small>000006-30HMA-00072</small></li> </ul> <b>Dr. Stewart F. Stowers</b> <ul style="list-style-type: none"> <li>Left knee ache <small>Tennessee Orthopedic Associates, 000006-69AQC-00063</small></li> </ul>	<b>Dr. Stewart F. Stowers</b> <ul style="list-style-type: none"> <li>Severe right hip <b>pain</b> <small>Tennessee Orthopedic Associates, 000006-69AQC-00062</small></li> </ul> <b>Dr. Eugene M. Regan Jr.</b> <ul style="list-style-type: none"> <li>Right hip and groin <b>pain</b>; significant limp <small>Tennessee Orthopedic Alliance, 000006-69AQC-00061</small></li> <li>Difficulty sleeping because of hip <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-69AQC-00061</small></li> <li>Left shoulder problems <small>Tennessee Orthopedic Alliance, 000006-32TOA-00047</small></li> </ul> <b>Vicki Bryant, P.T.</b> <ul style="list-style-type: none"> <li>Low back <b>pain</b>; foot symptoms <small>000006-69AQC-00133</small></li> </ul> <b>Dr. James Cato</b> <ul style="list-style-type: none"> <li>Lower abdominal <b>pain</b> <small>Heritage Medical Associates, 000006-30HMA-00029</small></li> <li>Chest <b>pain</b>; arm tingling; numbness to left side of face <small>Heritage Medical Associates, 000006-30HMA-00030</small></li> </ul>	<b>Dr. Tom Nesbitt</b> <ul style="list-style-type: none"> <li>Difficulty urinating, with burning <small>Spalding &amp; Nesbitt Urology Clinic, 000006-625NUC-00021</small></li> </ul> <b>RAH</b> <ul style="list-style-type: none"> <li>Lower abdominal <b>pain</b> <small>Colon &amp; Rectal Surgery Associates, 000006-48CRSA-00006</small></li> <li>Pressure in rectum, scrotum, and groin <small>Colon &amp; Rectal Surgery Associates, 000006-48CRSA-00006</small></li> </ul> <b>Dr. Eugene M. Regan Jr.</b> <ul style="list-style-type: none"> <li>Right knee <b>pain</b>; low back <b>pain</b>; left knee tightness <small>Tennessee Orthopedic Alliance, 000006-32TOA-00046</small></li> </ul> <b>Dr. Tom Nesbitt</b> <ul style="list-style-type: none"> <li>Testicular <b>pain</b>; erectile discomfort <small>Spalding &amp; Nesbitt Urology Clinic, 000006-625NUC-00018</small></li> </ul>	<b>Dr. James Cato</b> <ul style="list-style-type: none"> <li>Chest discomfort; facial soreness <small>Heritage Medical Associates, 000006-30HMA-00032-33</small></li> </ul> <b>Dr. Eugene M. Regan Jr.</b> <ul style="list-style-type: none"> <li>Left ankle <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-32TOA-00044-45</small></li> <li>Increasing right knee <b>pain</b> with significant limp <small>Tennessee Orthopedic Alliance, 000006-32TOA-00044-45</small></li> </ul>	<b>Dr. James Cato</b> <ul style="list-style-type: none"> <li>Left shoulder soreness and biceps tenderness <small>Heritage Medical Associates, 000006-30HMA-00036-37</small></li> <li><b>Pain</b> under rib cage <small>Heritage Medical Associates, 000006-42HMA-00116-117</small></li> </ul> <b>Dr. Stewart F. Stowers</b> <ul style="list-style-type: none"> <li>Right knee stiffness <small>Tennessee Orthopedic Associates, 000006-32TOA-00023</small></li> </ul> <b>Baptist Hospital ER</b> <ul style="list-style-type: none"> <li>Rib <b>pain</b>; shoulder <b>pain</b>; chest <b>pain</b>; abdominal <b>pain</b> <small>000006-78BAH-00019</small></li> </ul>

# Mr. Smith's Pain Complaints

2000	2001	2002	2003	2004	
<div>Dr. Stewart F. Stowers</div> <ul style="list-style-type: none"><li>Left sacroiliac <b>pain</b> [hip/buttocks region] <small>Tennessee Orthopedic Alliance, 000006-69AQC-00022</small></li><li>Left knee flare-up; ankle soreness <small>Tennessee Orthopedic Alliance, 000006-69AQC-00021</small></li></ul> <div>Dr. James Cato</div> <ul style="list-style-type: none"><li>Left knee <b>pain</b> <small>Heritage Medical Associates, 000006-30HMA-00042-43</small></li></ul> <div>Dr. Tom Nesbitt</div> <ul style="list-style-type: none"><li>Groin <b>pain</b> <small>Spalding &amp; Nesbitt Urology Clinic, 000006-625NUC-00014</small></li></ul>	<div>Dr. Stewart F. Stowers</div> <ul style="list-style-type: none"><li>Left shoulder <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-32TOA-00022</small></li><li>Left knee <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-69AQC-00016</small></li><li>Left knee and left ankle <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-69AQC-00015</small></li></ul> <div>Dr. James Cato</div> <ul style="list-style-type: none"><li><b>Pain</b> across shoulder blades <small>Heritage Medical Associates, 000006-30HMA-00048-49</small></li><li>Neck <b>pain</b> and stiffness; vertigo <small>Heritage Medical Associates, 000006-30HMA-00050-51</small></li><li>Neck/shoulder <b>pain</b> and spasms; rib soreness; poor sleep <small>Heritage Medical Associates, 000006-30HMA-00052-53</small></li><li>Chest soreness <small>Heritage Medical Associates, 000006-30HMA-00054-55</small></li></ul> <div>Dr. Gregory Mowery</div> <ul style="list-style-type: none"><li>Vertigo; balance problems <small>Otolaryngology Associates of Tennessee, 000006-11OAT-00001</small></li></ul> <div>Dr. Tom Nesbitt</div> <ul style="list-style-type: none"><li>Groin <b>pain</b> <small>Spalding &amp; Nesbitt Urology Clinic, 000006-625NUC-00013</small></li></ul>	<div>Dr. Stewart F. Stowers</div> <ul style="list-style-type: none"><li>Left shoulder <b>pain</b> and weakness <small>Tennessee Orthopedic Alliance, 000006-32TOA-00021</small></li><li>Left knee <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-32TOA-00021</small></li></ul> <div>Dr. Tom Nesbitt</div> <ul style="list-style-type: none"><li>Intermittent groin <b>pain</b> <small>Spalding &amp; Nesbitt Urology Clinic, 000006-625NUC-00012</small></li></ul> <div>Dr. Stuart E. Smith</div> <ul style="list-style-type: none"><li>Global <b>pain</b> and stiffness <small>Tennessee Orthopedic Alliance, 000006-69AQC-00008</small></li></ul> <div>Dr. Jeffrey P. Lawrence</div> <ul style="list-style-type: none"><li>Left shoulder <b>pain</b> and inability to lift arm <small>Premier Orthopaedics &amp; Sports Medicine, 000006-120POS-00007</small></li></ul>	<div>Dr. Tom Nesbitt</div> <ul style="list-style-type: none"><li>Intermittent groin <b>pain</b>, <b>pain</b> with urination <small>Spalding &amp; Nesbitt Urology Clinic, 000006-625NUC-00011</small></li><li>Leg and spine <b>pain</b> <small>Spalding &amp; Nesbitt Urology Clinic, 000006-625NUC-00028</small></li></ul> <div>Dr. Michael Santi</div> <ul style="list-style-type: none"><li>Lower abdominal <b>pain</b> <small>Colon &amp; Rectal Surgery Associates, 000006-48CRSA-00005</small></li></ul> <div>Dr. James Cato</div> <ul style="list-style-type: none"><li>Sore joints; bladder/prostate symptoms <small>Heritage Medical Associates, 000006-30HMA-00058-59</small></li><li><b>Pain</b> in all joints; not sleeping <small>Heritage Medical Associates, 000006-30HMA-00060-62</small></li><li>Joint <b>pain</b>; back <b>pain</b>/numbness/tingling <small>Heritage Medical Associates, 000006-42HMA-00140-141</small></li><li>Anxiety and depression <small>Heritage Medical Associates, 000006-30HMA-00063-64</small></li><li>Nerve pricking down back; <b>pain</b> in legs, knees, ankles after lumbar surgery <small>Heritage Medical Associates, 000006-30HMA-00063-64</small></li><li>Right hamstring spasm <small>Heritage Medical Associates, 000006-30HMA-00065-66</small></li></ul> <div>Dr. Michel McDonald</div> <ul style="list-style-type: none"><li>Arthritis <small>Vanderbilt University Medical Center, 000006-40VUM-00009</small></li></ul> <div>Dr. Stuart E. Smith</div> <ul style="list-style-type: none"><li><b>Pain</b> in buttocks radiating to calves <small>Tennessee Orthopedic Alliance, 000006-69AQC-00006</small></li><li>Bilateral hip and knee <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-69AQC-00006</small></li></ul> <div>Dr. Carl Hampf</div> <ul style="list-style-type: none"><li>Hip, back, and bilateral leg <b>pain</b> and paresthesias <small>000006-53CAH-00003-4</small></li><li>Frequent joint <b>pain</b>, even in replaced joints <small>000006-1PRD-00162-165</small></li><li>Depressed because of <b>pain</b> and lack of sleep <small>000006-1PRD-00162-165</small></li></ul>	<div>Dr. Frank M. Berklach</div> <ul style="list-style-type: none"><li>Significant low back and bilateral leg <b>pain</b> <small>000006-18FMB-00002-3</small></li><li>Numbness and pins/needles in both legs <small>000006-18FMB-00002-3</small></li><li>Weakness and difficulty walking <small>000006-18FMB-00002-3</small></li><li>Sleep impaired by <b>pain</b> <small>000006-18FMB-00002-3</small></li><li>Diarrhea due to anxiety and <b>pain</b> <small>000006-52FMB-00041</small></li></ul> <div>Dr. Paul R. McCombs III</div> <ul style="list-style-type: none"><li>Back and bilateral leg <b>pain</b> <small>Neurosurgical Associates, 000006-34NEA-00021</small></li><li>Back and bilateral leg <b>pain</b> symptoms unchanged <small>Neurosurgical Associates, 000006-34NEA-00020</small></li><li>Severe low back and leg <b>pain</b> after lumbar surgery <small>Neurosurgical Associates, 000006-1PRD-00408</small></li><li>Continues with <b>pain</b> and is very concerned <small>Neurosurgical Associates, 000006-1PRD-00408</small></li><li>Wishes he could die because of <b>pain</b> and depression <small>Neurosurgical Associates, 000006-1PRD-00408</small></li><li>Increased leg <b>pain</b> after lumbar surgery <small>Neurosurgical Associates, 000006-34NEA-00001</small></li></ul> <div>Dr. Jeffrey L. Herring</div> <ul style="list-style-type: none"><li>Right ankle <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-69AQC-00003</small></li></ul> <div>Powers Chiropractic Clinic</div> <ul style="list-style-type: none"><li>Right shoulder <b>pain</b> <small>000006-126MAC-00002-3</small></li></ul>	<div>Neurosurgical Associates</div> <ul style="list-style-type: none"><li>Shocking sensation in bilateral legs <small>000006-34NEA-00002</small></li></ul> <div>Dr. James Cato</div> <ul style="list-style-type: none"><li><b>Pain</b> from back to ankles <small>Heritage Medical Associates, 000006-42HMA-00097</small></li><li>Left shoulder <b>pain</b>; chest tightness <small>Heritage Medical Associates, 000006-42HMA-00089-90</small></li></ul> <div>Dr. William A. Shell</div> <ul style="list-style-type: none"><li>Persistent low back <b>pain</b> since lumbar surgery <small>Tennessee Orthopedic Alliance, 000006-32TOA-00002-3</small></li><li>Bilateral radiating leg <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-32TOA-00002-3</small></li></ul> <div>Dr. Edward S. Mackey</div> <ul style="list-style-type: none"><li>Increasing left leg <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-32TOA-00004</small></li><li>Thoracic spine <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-32TOA-00015-16</small></li><li>Back and radicular <b>pain</b>; knee <b>pain</b> <small>Tennessee Orthopedic Alliance, 000006-32TOA-00005, 9</small></li><li>Knee <b>pain</b>; worsening bilateral leg <b>pain</b>, using wheelchair, not sleeping well <small>Tennessee Orthopedic Alliance, 000006-32TOA-00007</small></li></ul> <div>Dr. Tom Nesbitt</div> <ul style="list-style-type: none"><li>Difficulty urinating since back surgery <small>Spalding &amp; Nesbitt Urology Clinic, 000006-625NUC-00009</small></li></ul> <div>Pam Krancer, R.N., C.S., CNRN</div> <ul style="list-style-type: none"><li>Bilateral leg <b>pain</b> radiating from buttocks, perineal area [groin], and thigh to knees <small>Neurosurgical Associates, 000006-34NEA-00003</small></li></ul> <div>Physical Therapy Evaluation</div> <ul style="list-style-type: none"><li><b>Pain</b>/tingling from lumbar spine to ankle; left groin <b>pain</b> <small>University Medical Center, 000006-35UMC-00058</small></li><li><b>Pain</b> in knees and ankles; <b>pain</b> excruciating and sharp <small>University Medical Center, 000006-35UMC-00076</small></li></ul>

# February 6, 2003

## Tennessee Orthopaedic Alliance Notes – Dr. Smith

PATIENT NAME: SMITH, RICHARD H. DOS: 02/06/2003  
PATIENT NUMBER: 144649 JOB: 0  
PROVIDER: Stuart E. Smith, M.D.  
DOCUMENT TYPE: Office Visit  
PRACTICE NAME: Tennessee Orthopaedic Alliance  
CHART LOCATION: 1

Mr. Smith was down on his rump on 1-2-03, fixing some pipes and he says he has had pain in the buttock region both sides, radiating down to his calves ever since. He said his knees hurt and his right hip is probably worse than his left. He denies any groin pain. He denies any swelling or fever. He has used Tylenol with little relief. He said the pain has been persistent since 1-2-03.

**PHYSICAL EXAMINATION** Shows he does not limp. Both knees show 0 to 110° of flexion with no effusion. Stable ligaments. Right hip has fluid range of motion. Both legs 5+ motor, normal sensory exam. Straight leg raising tests are negative.

**X-RAYS:** X-rays of both knees show hybrid prosthesis, J&J type in place without any loosening, lysis or wear. The right hip is also a hybrid and shows slight eccentricity in the polyethylene component, but otherwise negative. No lysis or loosening.

**IMPRESSION:** Lumbar strain

**PLAN:** we will start him on Medrol Dosepak and Darvocet. He will see him back in 2 weeks, unless his symptoms have resolved. If he continues to have problems, he needs an x-ray of the lumbar spine at that point.

Stuart E. Smith, M.D./jb

000006-69AQC-00006

Mr. Smith was down on his rump on 1-2-03, fixing some pipes and he says he has had pain in the buttock region both sides, radiating down to his calves ever since. He said his knees hurt and his right hip is probably worse than his left.



# March 11, 2003

## Nurses Notes – Dr. Berklacich

NURSES NOTES

DATE \_\_\_\_\_ Name Richard Smith MR#: 5101

3-11-03 - called Dr. Berklacich regarding scheduling his surgery. He stated "I am already scheduled for surgery on Thursday 3-13-03 - I cannot wait - I am in so much pain." I ask who the physician was and the patient did not want to tell me. will make Dr. Hamp's office aware. Dr. Hamp

4-15-04 - on Dr. Berklacich's chart scheduled apt. Dr. Hamp

000006-52FMB-00052

"I am already scheduled for surgery on Thursday 3-13-03 – I cannot wait – I am in so much pain."



# April 1, 2003

## Dr. McCombs' Operative Report

### OPERATION:

1. Decompressive lumbar laminectomy with partial facetectomy and foraminotomy with microscope L3-4-5-1.
2. Posterolateral lumbar fusion using autograft and allograft bone L3-4-5-S1.

CENTENNIAL MEDICAL CENTER

PATIENT: SMITH, RICHARD HARTMAN  
HOSPITAL NO.: M000700750  
ROOM: M.6112  
LOCATION: M.76  
SURGEON: Paul R. McCombs, III  
STATUS: ADM IN

NASHVILLE, TENNESSEE

PATIENT: SMITH, RICHARD  
C98412787

MR#: 000700750 ADMITTED: 04/01/2003

DATE OF SURGERY: 04/01/2003

PREOPERATIVE DIAGNOSIS: Lumbar canal stenosis L3-4-5-S1.

POSTOPERATIVE DIAGNOSIS:

1. Lumbar canal stenosis L3-4-5-S1.
2. Segmental instability L3-4-5-1.

OPERATION:

1. Decompressive lumbar laminectomy with partial facetectomy and foraminotomy with microscope L3-4-5-1.
2. Posterolateral lumbar fusion using autograft and allograft bone L3-4-5-S1.

SURGEON: Paul R. McCombs III, M.D.

FIRST ASSISTANT: Rex E. Arendall II, M.D.

DESCRIPTION OF PROCEDURE: The patient was taken to the operating room and placed under general endotracheal anesthesia. The patient was then prepped and draped in the usual fashion. A skin incision was created over the spinous process of L3 down to the level of the sacrum. Electrocautery was used to transect through the subcutaneous tissue and lumbar fascia. Paraspinal muscle bundle was taken down with a Cobb elevator. Self-retaining retractor was placed in the wound for exposure.

Hemilaminectomy was carried along the inferior aspect of L3 bilaterally. High speed air drill was used to create a laminotomy from the inferior aspect of L3 to the superior aspect of L4. The laminectomy was extended under the full extent of the spinal canal. After this was completed, under microscopic control using microdissection techniques, the microscope was removed and the lateral masses were delineated and decorticated and a mixture of autograft and allograft bone placed in over these denuded bone surfaces. The wound was thoroughly irrigated. Gelfoam pledges were placed in the epidural space for hemostasis.

The wound was then closed with layers of Vicryl. The patient tolerated the procedure well and went to recovery room in stable condition.

Paul R. McCombs, III, M.D.

MCPA /M.MC.MSC  
D: 04/01/03: 04/02/03  
RSP: 0401-3104  
0443 04/10/03  
CC:

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000006-64CMD-00119

# May 2, 2003

## Neurosurgical Associates Notes – Dr. McCombs

NEUROSURGICAL ASSOCIATES  
PATIENT: SMITH, Mr. Richard H. Page 4  
DOCTOR: Paul McCombs, M.D. B.D.

21 April 03 CV: The patient returns to the office today in followup status post D.L. four weeks ago. He is doing well at the present time and is pleased with the results of his surgery to date. His wound is healing nicely and looks fine. I have advised him regarding the care of his back during this period of convalescence. He will use his discomfort as a guide for his activity. He will return to see me in four weeks in followup and further recommendations will depend on how he is doing at that time. PRM/jb

No letter.

4/29/03 pr c/o not big pain being severe after going to church and out to lunch. He has a Medrol Dosepak that he will start on 4/30/03. He has taken 50 mg of Vicof already today.

4/30/03 pr continues w/ pain & is very concerned. 7:30 AM CMC CBC & diff sent. Had late, prob. failed.

5/1/03 pr notified per PR that X-ray is good as well as pain.

4/30/03 patient's daughter states pr wishes he could die because of pain & depression. Advised to take pr. to ER for psych. eval. & tx. per/ptla

Spoke w[ith] p[atien]t's daughter. States p[atien]t wishes he could die because of pain and depression. Advised to take p[atien]t to ER for psych. eval and tx [treatment].

SHIRLEY CONFIDENTIAL

000006-1PRD-00408

SHIRLEY\_A\_0000408



# May 15, 2003

## Dr. Cato's Notes

Richard Smith 30899 05-15-03  
781204 14450 68 1413  
AIDS - HIV INFECTION (HIV)

had back pain 4-1  
having a lot of pain  
neck & ankles had

PHYSICIAN EXAMINATION

General: Appearance: Well  
Vital Signs: Temp 37.5, HR 78, BP 120/80, RR 18, SpO2 98%  
ENT: Oropharynx: Normal, Larynx: Normal, Trachea: Normal  
Neck: No lymphadenopathy, No thyroid enlargement  
Chest: Clear, No wheezes, No crackles  
Abdomen: Soft, No tenderness, No masses  
Genitourinary: Normal  
Skin: No rashes, No lesions  
Neurological: No focal deficits, No abnormal reflexes  
Psychiatric: No depression, No anxiety

lost laminar syndrome  
Back pain  
A/D  
Vioxx 12.5  
Resipramine 10 hs  
Lexapro 10 qd

had back pain 4-1  
having a lot of pain  
neck & ankles had

lost laminar syndrome  
Back pain  
A/D

Vioxx 12.5

Resipramine 10 hs  
Lexapro 10 qd

# Prescription

## Deposition of Ruth Smith

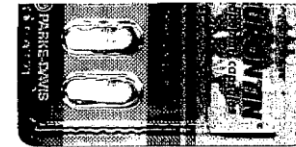
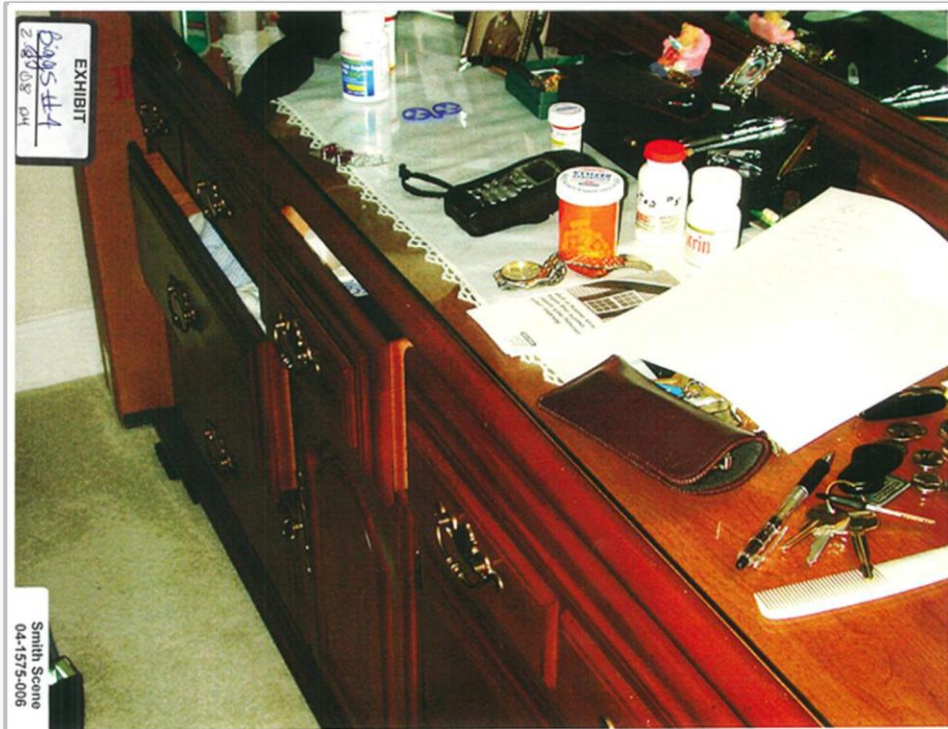
**A. I did.**

**A. Yes.**

## Eckerd Drugs Records

Case 3:05-cv-00444 Document 173-2 Filed 04/27/10 Page 10 of 12 PageID #: 3975

# Neurontin Supplies Remaining After Mr. Smith's Death



6 of these

6 of these

000006-73PRI-00036

# Suicide Risk in Elderly Pain Patients

## ORIGINAL INVESTIGATION

### Medical Illness and the Risk of Suicide in the Elderly

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**Background:** Suicide is a leading cause of death, and rates are especially high among the elderly. Medical illnesses may predispose to suicide, but few controlled studies have examined the association between specific diseases and suicide. We explored the relationship between treatment for several illnesses and the risk of suicide in elderly patients using a population-based approach.

**Methods:** All Ontario residents 65 years or older who committed suicide between January 1, 1992, and December 31, 2000, were identified from provincial coroners' records. Their prescription records during the preceding 6 months were compared with those of living matched controls (1:4) to determine the presence or absence of 17 illnesses potentially associated with suicide.

**Results:** During the 9-year study period, we identified 1354 elderly patients who died of suicide. The most common mechanisms involved firearms (28%), hanging (24%), and self-poisoning (22%). Specific illnesses associated with suicide included congestive heart failure (odds ratio [OR],

1.73; 95% confidence interval [CI], 1.33-2.24), chronic obstructive lung disease (OR, 1.62; 95% CI, 1.37-1.92), seizure disorder (OR, 2.95; 95% CI, 1.80-4.61), urinary incontinence (OR, 2.02; 95% CI, 1.29-3.17), anxiety disorders (OR, 4.05; 95% CI, 4.07-5.32), depression (OR, 6.44; 95% CI, 5.49-7.61), psychotic disorders (OR, 5.09; 95% CI, 3.94-6.59), bipolar disorder (OR, 9.20; 95% CI, 4.38-19.33), moderate pain (OR, 1.91; 95% CI, 1.66-2.20), and severe pain (OR, 7.52; 95% CI, 4.93-11.40). Treatment for multiple illnesses was strongly related to a higher risk of suicide. Almost half the patients who committed suicide had visited a physician in the preceding week.

**Conclusions:** Many common illnesses are independently associated with an increased risk of suicide in the elderly. The risk is greatly increased among patients with multiple illnesses. These data may help clinicians to identify elderly patients at risk of suicide and open avenues for prevention.

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SUICIDE IS A MAJOR HEALTH problem, ranking as the 11th leading cause of death in the United States and accounting for about 30,000 deaths each year.<sup>1,2</sup> Factors associated with an increased suicide risk include modifiable conditions such as mood disorders,<sup>3</sup> alcoholism,<sup>4,5</sup> and substance abuse,<sup>6</sup> as well as fixed characteristics such as male sex<sup>7</sup> and advancing age.<sup>8</sup> The elderly generally attempt suicide with much higher lethality than younger persons and in many countries kill themselves at a rate higher than any other segment of the population.<sup>9,10</sup> However, suicide in the elderly generally receives less attention in the medical literature and news media than suicide in young adults.<sup>11</sup>

Suicide among older persons differs in many ways from suicide in younger individuals,<sup>10,12</sup> because older individuals generally attempt suicide with more le-

thal methods, the ratio of completed to attempted suicides increases substantially with age.<sup>13-16</sup> Elderly persons who commit suicide are less likely to have discussed their plans beforehand,<sup>17</sup> and non-violent deaths from suicide in the elderly may be mistakenly attributed to illness. In addition, distinctive stresses accompany late life, including retirement, loss of a loved one, social isolation, and an increasing burden of disability, each of which has been suggested as a risk factor for suicide in the elderly.<sup>18,19,20</sup>

*For editorial comment see page 1171*

Many studies have proposed a link between illness and suicide.<sup>21-26</sup> Most of these associations, however, are inferred from uncontrolled case series, and few rigorous studies have been published.<sup>27-29</sup> One report of 42 cases found that patients with greater

The risk for suicide among patients with severe pain merits particular attention. Patients with severe pain and inadequate analgesia may view suicide as a means of escape from suffering.

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